U.S. Departmen of Labor Office of Labor Management Standards Washington DC 20210

(2003)

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215 0188 Expires 11 30 2006

This report is mandatory under Pt 66-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440 READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT E 1 File Number U 2 Fiscal Year Covered From 01 / 01 / 2004 Through 12]/ 3] / 2004' 4 Name file number and address of labor organization 3 Name and address of person filing E, Turner, Jr Name Carpenters Local Union #107-Organizing Dept Labor Organization File Number 043 548 PO Box Bldg Room No If any P O Box Building and Room Number if any 10 Foxboro Street 29 Endicott Street \_\_\_\_\_ City City Worcester Worcester ZIP Loda + 401607-1212 ZIP Code + 4 01610-1894 State 5 Position in labor organization Organi, er / JAC Enter appropriate data below If during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions) A Held an interest in lengaged in transactions (including loans) with lor derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent 7 a Nature of Interest Transaction or Income 6 Name and address of Employer (including trade name if any) Annual ESAC Conference hosted by Macne Department of Labor (Eastern Scabiard Apprenticeship Conference) Trade Name if any PO Box Bldg Room No if any 7 b. Amount Street City \$534 00 State Signature 15 Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned sknowledge and belief true operect and complete (See the section on penalties in the instructions )

Name of Person Filing James E Turner Ir	File Number O
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested	
8 Name and address of Business (including trade name if any)	9 Business deals with
Name ,	
Trade Name If any	a Labor Organization
P O Box Bldg Room No If any	X b Trust
Street	c Employir
City	
State ZIP Code +4	
10 If 9 b or 9 c is checked give trust or employers name	11 a Nature of such dealing
Name Worcester Carpenters Apprentice & Training Fund	Attended Annual ESAC Conference sponsored by Mache Department of Labor 5
Trade Name If any	,
PO Box Bidg Room No if any	Eastern Seabward Apprenticeship Conference
Street 29 Endicott Street	The state of the s
City Worcester	11 b Approximate dollar value of such dealing \$534.00 -
State MA ZIP Code + 4 01610-1894	substitution folia de companie
merekkendi dibunya andanak kalamatan uat uar laha atauma dibunya andan kalama kalama kalama kalama kalama kalama	t the state of expenses
	t a suger g
	<u></u>
	12 b Amount \$534 00
	12 b Amount \$534 00 *
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant	14 a Nature of payment
(including trade name if any)	
Name	
Trade Name If any	
PO Box Bldg Room No If any	A S S S S S S S S S S S S S S S S S S S
St eet	-
City :	
State ZIP Coc +4	
r	14 b Amount of payment
13 b Is the Business an Employer or Consultant ?	*

## **DISCLAIMER**

The transactions and income received as detailed in Section 12 of the attached Form LM 30 represents my good faith effort to reconstruct reportable occurrences from January 1, 2004 to December 31, 2004. I did not maintain records of reportable occurrences during 2004, and it is possible that some reportable items may have been unintentionally omitted. If I subsequently learn of a transaction or interest that should have been reported for that time period, I will file an amended form LM-30.